



Community First Choice

Enhancing Member Directed Services Options for Individuals Receiving Long Term Care

Stakeholder Informational Session
October 29, 2012

Agenda

- ❑ Overview of the History of Member-Directed Options in the ALTCS program
- ❑ Overview of the Community First Choice Option
- ❑ Overview of the Agency with Choice Model
- ❑ Overview of Operational Considerations and Practices
- ❑ Next Steps

History of Member Direction in Arizona

- Independent provider network/fiscal intermediary model introduced for members with developmental disabilities in 2005
- Self-directed attendant care model introduced for members who are elderly and/or have physical disabilities in October 2008
- *Note: traditional agency model has been available since onset of program*

History of Member Direction in Arizona

- Utilization of member-directed service options
 - Independent provider/fiscal intermediary
 - Approximately 1300 individuals currently using this option
 - Self-directed attendant care
 - 230 individuals elected this option in contract year ending 2011

Service Models: Current Continuum

Traditional

Self Directed
Attendant
Care/Independent
Provider
(fiscal intermediary)

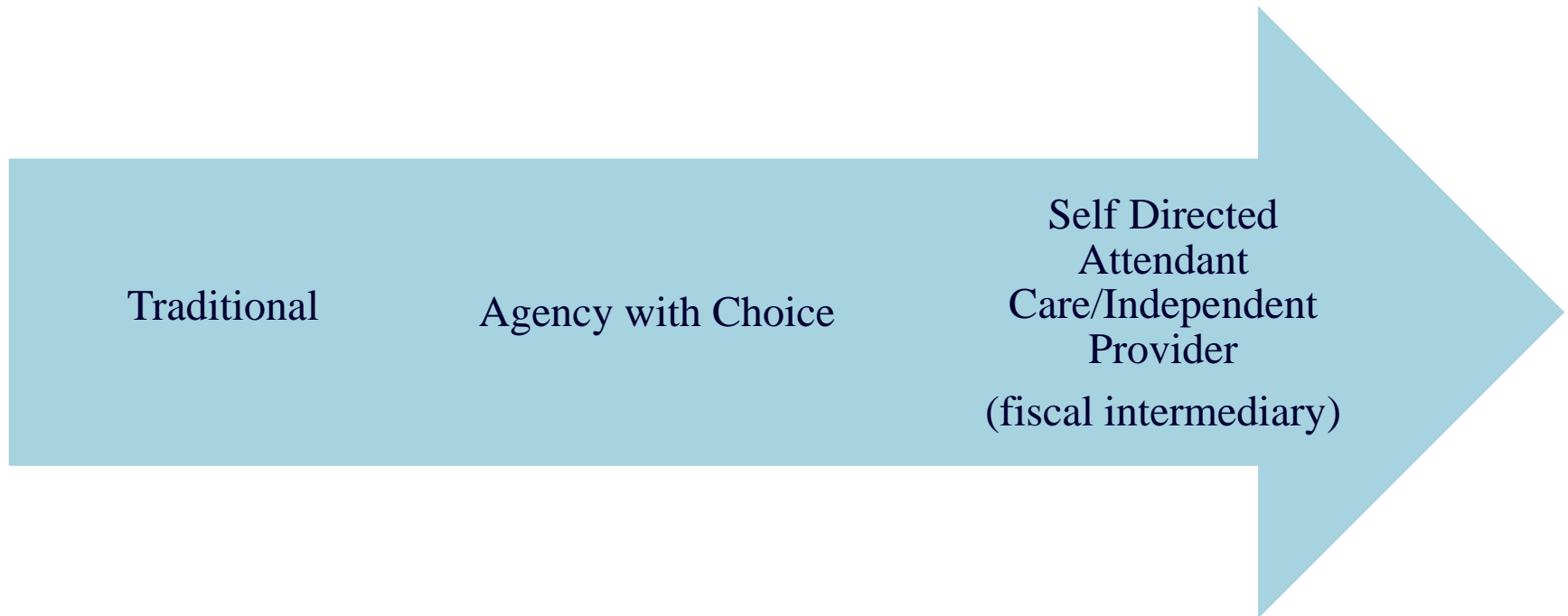
Community First Choice: Authority and Purpose

- The Patient Protection and Affordable Care Act
 - TITLE II - Role of Public Programs, Subtitle E - New Options for States to Provide Long-Term Services and Supports
 - SEC. 2401. Community First Choice Option
 - Requires the establishment of Development and Implementation Council
 - Federal regulations published on May 7, 2012
- Provide States with additional resources to make community living a first choice, leaving nursing homes and institutions as a fall back option
- States eligible to receive a six percent increase in federal matching funds to enhance community-based attendant services and supports to individuals

Community First Choice: Agency with Choice Service Model

- ☐ Eligible members
 - Members receiving services in their own home
 - Receiving at least one of the following services:
 - ☐ Attendant Care
 - ☐ Personal Care
 - ☐ Homemaker
 - ☐ Habilitation
- ☐ Co-employment relationship between the member and the agency
- ☐ Member acts as the day-to-day managing employer
- ☐ Agency remains the legal employer of record

Member-Directed Models: Expanded Continuum Under Agency with Choice



Community First Choice: Agency with Choice Service Model

☐ Member/Individual Representative Role*

- Select/recruit and dismiss providers
- Specify provider qualifications
- Manage providers in the provision of services and supports that are within the scope of the approved person-centered service plan
 - ☐ Determine provider duties
 - ☐ Schedule providers
 - ☐ Orient the provider and give direction on how tasks will be performed
- Supervise providers
 - ☐ Communicate with the provider agency about the provider's performance
- Require other training as needed, in order to meet the unique needs of the member

**Must elect to select and dismiss providers and may elect to assume other listed responsibilities*

Community First Choice: Agency with Choice Service Model

☐ Agency role

- Ensure the provider meets the minimum qualifications
- Hire/fire providers
- Provide standardized training to the provider
- Account for and complete necessary paperwork
 - ☐ Payroll, taxes
 - ☐ Timesheets, billing
- Conduct required supervision visitations
- Assume those responsibilities that the member/individual representative does not assume

Community First Choice: Conflict Standard

- ❑ Federal regulation for member-directed options (42 CFR 441.505)
- ❑ Individual representative
 - Parent, family member, guardian, advocate, or other person authorized by the individual to serve as a representative in connection with the provision of services and supports
 - The role of the individual representative is to act on the member's behalf in electing and directing care under a member-directed option including representing the member during the service planning process.
 - Individual representative cannot also serve as the paid caregiver for a member
- ❑ At this time, AHCCCS will implement this provision only for individuals selecting the Agency with Choice service model

Operational Considerations & Practices

- Participate in AHCCCS provider training (Dec-Jan 2013)
 - Overview of co-employment roles and responsibilities for each party
 - Provider testimonials
 - Review of self-assessment “readiness” tool
 - Review of co-employment agreement
- Decide whether or not to offer the model
- Utilization of co-employment agreement with a new member or member who has decided to use the model
- Use of the U7 service code modifier
 - Attendant Care
 - Habilitation

Next Steps

- ❑ Obtain approval from the Centers for Medicare & Medicaid Services (CMS) on State Plan Amendment, submitted on October 5, 2012
- ❑ Finalize state regulations (hearing held on September 24, 2012)
 - Scheduled to be effective on January 1, 2013
- ❑ Finalize necessary policy revisions
- ❑ Educate case managers and providers
- ❑ Continue to communicate with stakeholders

Visit the AHCCCS Webpage

- ❑ Federal regulation
 - ❑ Updated member communication
 - ❑ Updated information on the state rules and state plan amendment
 - ❑ Copy of today's presentation
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- 1) Go to the AHCCCS website (www.azahcccs.gov)
 - 2) Click on the “Members” tab in the top left-hand corner
 - 3) Select “AHCCCS Member Resources”
 - 4) Select “ALTCS Member-Directed Options”

<http://www.azahcccs.gov/shared/SDAC.aspx?ID=memberresources>



“Reaching across Arizona to provide comprehensive quality health care for those in need”



Questions